County of San Bernardino

F A S

CONTRACT TRANSMITTAL

☒ New ☐ Change ☐ Cancel	Vendor Code

SC Dept. **PHL** **A** Contract Number

County Department	Dept.	Orgn.	Contractor's License No.
Public Health	PHL	PHL	

County Department Contract Representative	Telephone	Total Amount
Vanessa Long	388-5740	

Contract Type
☐ Revenue ☐ Encumbered ☐ Unencumbered ☒ Other: Application

If not encumbered or revenue contract type, provide reason:

Commodity Code	Contract Start Date	Contract End Date	Original Amount	Amendment Amount
	June 1, 2005	May 31, 2009		

Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount
AAA	PHL			9150	93370	$3,000,000
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount

Project Name	Estimated Payment Total by Fiscal Year					
Eliminating Disparities in Perinatal Health Project	FY	Amount	I/D	FY	Amount	I/D

CONTRACTOR   U.S. Department of Health and Human Services, Health Resources and Services Administration

Federal ID No. or Social Security No.

Contractor's Representative   The Legin Group, Inc., HRSA Grants Application Center

Address 901 Russell Avenue, Suite 540, Gaithersburg, MD 20879   Phone   877-477-2123

Nature of Contract: *(Briefly describe the general terms of the contract)*

This is an application to the U.S. Department of Health and Human Services, Health Resources and Services Administration, for the Eliminating Disparities in Perinatal Health project for the four-year period of June 1, 2005 through May 31, 2009.

THIS IS NOT A CONTRACT
THIS IS A COVER TRANSMITTAL ONLY

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)

Approved as to Legal Form (sign in blue ink)	Reviewed as to Contract Compliance	Presented to BOS for Signature
►	►	►
County Counsel		Department Head

Auditor/Controller-Recorder Use Only

☐ Contract Database	☐ FAS
Input Date	Keyed By

Date _____ Date _____ Date _____